

04-09-01

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JC962 U.S. PTO
04/06/01

Please type a plus sign (+) inside this box [+]

PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 005140.P5252
First Named Inventor Stephen D. Paul

Title: Discovery and Configuration of Network attached Storage Devices

Express Mail Label No. EL8453136777US

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, D. C. 20231

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)

2. Applicant Claims Small Entity Status. (37 CFR 1.27)

3. Specification (Total Pages 20)
(preferred arrangement set forth below)

- Descriptive Title of the Invention
- Cross Reference to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4. Drawings(s) (35 USC 113) (Total Sheets 6)

5. Oath or Declaration (Total Pages 5)

a. Newly Executed (Original or Copy)

b. Copy from a Prior Application (37 CFR 1.63(d))
(for Continuation/Divisional with Box 17 completed)

i. **DELETIONS OF INVENTOR(S)** Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).

c. Unsigned.

6. Application Data Sheet. (37 CFR 1.76)

7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)

a. Computer Readable Form (CRF)

b. Specification Sequence Listing on:
 i. CD-ROM or CD-R (2 copies), or
 ii. paper

c. Statement verifying identity of above copies

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April 6, 2001

Date of Deposit

Krista Mathiesen

Name of Person Mailing Correspondence

Krista Mathiesen

Signature

Date

Attorney Docket No.: 42390P9977
 Express Mail Certificate No.: El 845313283 US- 1 -

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04/06/01

ACCOMPANYING APPLICATION PARTS

9. **Assignment Papers (cover sheet & documents(s))**

10. a. Separate 37 CFR 3.73(b) Statement (where there is an assignee)
 b. Power of Attorney

11. English Translation Document (if applicable)

12. a. Information Disclosure Statement (IDS)/PTO-1449
 b. Copies of IDS Citations

13. **Preliminary Amendment**

14. **Return Receipt Postcard (MPEP 503) (Should be specifically itemized)**

15. Certified Copy of Priority Document(s) (if foreign priority is claimed)

16. **Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.**

17. Other: Express Mail Certificate

18A. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

Continuation Divisional Continuation-in-part (CIP)
Of Prior Application No.: _____ Examiner _____ Group Art Unit _____

(which is a continuation/ divisional/ CIP of prior application no. _____,
which is a continuation/ divisional/ CIP of prior application no. _____) (List entire chain of priority)

For CONTINUATION AND DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18B. Statement under 37 CFR 3.73(b) for continuing application:

The undersigned states that _____ (name of assignee) is
the assignee of the entire right, title, and interest in the accompanying patent application by virtue of an
assignment recorded in the Patent and Trademark Office at Reel. No. _____ Frame No. _____
(or a copy of which is attached).

19. Correspondence Address

Customer Number or Bar Code Label _____
or _____ (Insert Customer No. or Attach Bar Code Label here)

Correspondence Address Below

NAME _____

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

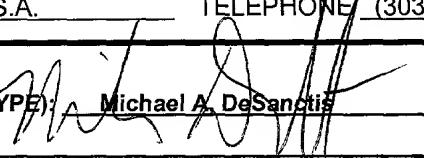
ADDRESS 12400 Wilshire Boulevard

Seventh Floor

CITY Los Angeles STATE California ZIP CODE 90025-1026

Country U.S.A. TELEPHONE (303) 740-1980 FAX (303) 740-6962

Name (PRINT/TYPE) Michael A. DeSanctis Registration No.: 39,957

Signature:  Date: April 6, 2001

Attorney Docket No.: 005140.P5252

Express Mail Certificate No.: EL 845313677US

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04/90/01

FEE TRANSMITTAL FOR FY 2001

TOTAL AMOUNT OF PAYMENT (\$) \$1554.00

Complete if Known:

Application No. Concurrently HerewithFiling Date Concurrently HerewithFirst Named Inventor Stephen D. PaulGroup Art Unit Not Yet AssignedExaminer Name Not Yet AssignedAttorney Docket No. 005140.P5252

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 02-2666
Deposit Account Name

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2. Payment Enclosed: Check
 Credit Card
 Money Order
 Other

April 6, 2001

Date of Deposit

Krista Mathiesen

Name of Person Mailing Correspondence

Krista Mathiesen

Signature

Date

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Description	Fee Paid
101	710	201 Utility application filing fee	\$710.00
106	320	206 Design application filing fee	
107	490	207 Plant filing fee	
108	710	208 Reissue filing fee	
114	150	214 Provisional application filing fee	
SUBTOTAL (1)			\$ 710.00

2. EXTRA CLAIM FEES

Total Claims	Independent Claims	Extra Claims	Fee from below	Fee Paid
38	9	- 20** = 18	X \$18.00	= \$324.00
		- 3** = 6	X \$80.00	= \$480.00
				=

**Or number previously paid, if greater; For Reissues, see below.

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Description	Fee Paid
103	18	203 9 Claims in excess of 20	
102	80	202 40 Independent claims in excess of 3	
104	270	204 135 Multiple dependent claim, if not paid	
109	80	209 40 **Reissue independent claims over original patent	
110	18	210 9 **Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)			\$804.00

FEE CALCULATION (continued)

Attorney Docket No.: 005140.P5252

Express Mail Label No.: EL 845313677US

703-285-0280

3. ADDITIONAL FEES

<u>Large Entity</u>	<u>Small Entity</u>	<u>Fee Description</u>	<u>Fee Paid</u>
Fee Code 105	Fee Code 205	Surcharge - late filing fee or oath	_____
130	65	Surcharge - late provisional filing fee	_____
50	227	or cover sheet	_____
139	139	Non-English specification	_____
147	2,520	For filing a request for ex parte reexamination	_____
920*	112	Requesting publication of SIR prior to	_____
		Examiner action	_____
113	1,840*	Requesting publication of SIR after	_____
		Examiner action	_____
115	215	Extension for reply within first month	_____
116	216	Extension for reply within second month	_____
890	217	Extension for reply within third month	_____
1,390	218	Extension for reply within fourth month	_____
1,890	228	Extension for reply within fifth month	_____
310	219	Notice of Appeal	_____
310	220	Filing a brief in support of an appeal	_____
270	221	Request for oral hearing	_____
1,510	1,510	Petition to institute a public use proceeding	_____
110	240	Petition to revive – unavoidable	_____
1,240	241	Petition to revive - unintentional	_____
1,240	242	Utility issue fee (or reissue)	_____
440	243	Design issue fee	_____
600	244	Plant issue fee	_____
130	122	Petitions to the Commissioner	_____
130	123	Petitions related to provisional applications	_____
180	126	Submission of Information Disclosure Stmt	_____
40	581	Recording each patent assignment per	_____
		property (times number of properties)	\$40.00
710	246	For filing a submission after final rejection	_____
		(see 37 CFR 1.129(a))	_____
710	249	For each additional invention to be examined	_____
		(see 37 CFR 1.129(b))	_____
710	279	Request for Continued Examination (RCE)	_____
900	169	Request for expedited examination of a design	_____
		application	_____

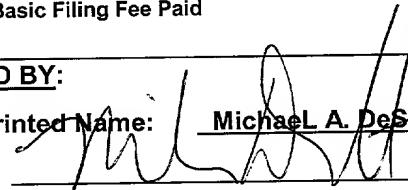
Other fee (specify) _____

Other fee (specify) _____

SUBTOTAL (3) \$40.00

*Reduced by Basic Filing Fee Paid

SUBMITTED BY:

Typed or Printed Name: Michael A. DeSanctis
 Signature:  Date: April 6, 2001
 Reg. Number: 39,957 Telephone Number: (303) 740-1980

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Serial/Patent No.: ********* Filing/Issue Date: **Concurrently Herewith**
Client: **Sun Microsystems, Inc.** Title: **Discovery and Configuration of Network Attached**

Storage Devices
BSTZ File No.: **005140.P5252** Atty/Secty Initials: **MAD/WJD/kam**
Date Mailed: **April 6, 2001** Docket Due Date:

The following has been received in the U.S. Patent & Trademark Office on the date stamped hereon:

<input type="checkbox"/> Amendment/Response (____ pgs.)	<input checked="" type="checkbox"/> Express Mail No: EL845313677	<input checked="" type="checkbox"/> Check No: 1397
<input type="checkbox"/> Appeal Brief (____ pgs.) (in triplicate)	<input type="checkbox"/> Month(s) Extension of Time	Am: \$1514.00
<input checked="" type="checkbox"/> Application - Utility (20 pgs. with cover and abstract)	<input type="checkbox"/> Information Disclosure Statement & PTO-1449 (____ pgs.)	<input checked="" type="checkbox"/> Check No: 1398
<input type="checkbox"/> Application - Rule 1.53(b) Continuation (____ pgs.)	<input type="checkbox"/> Issue Fee Transmittal	Am: \$40.00
<input type="checkbox"/> Application - Rule 1.53(b) Divisional (____ pgs.)	<input type="checkbox"/> Notice of Appeal	
<input type="checkbox"/> Application - Rule 1.53(b) CIP (____ pgs.)	<input type="checkbox"/> Petition for Extension of Time	
<input type="checkbox"/> Application - Rule 1.53(d) CPA Transmittal (____ pgs.)	<input type="checkbox"/> Petition for _____	
<input type="checkbox"/> Application - Design (____ pgs.)	<input checked="" type="checkbox"/> Postcard	
<input type="checkbox"/> Application - PCT (____ pgs.)	<input type="checkbox"/> Power of Attorney (____ pgs.)	
<input type="checkbox"/> Application - Provisional (____ pgs.)	<input type="checkbox"/> Preliminary Amendment (____ pgs.)	
<input checked="" type="checkbox"/> Assignment and Cover Sheet (signed)	<input type="checkbox"/> Reply Brief (____ pgs.)	
<input checked="" type="checkbox"/> Certificate of Mailing	<input type="checkbox"/> Response to Notice of Missing Parts	
<input checked="" type="checkbox"/> Declaration & POA (5 pgs.)	<input type="checkbox"/> Small Entity Declaration for Indep. Inventor/Small Business	
<input type="checkbox"/> Disclosure Docs & Orig & Cpy of Inventor's Signed Letter (____ pgs.)	<input checked="" type="checkbox"/> Transmittal Letter, in duplicate	
<input checked="" type="checkbox"/> Drawings: 6 # of sheets includes 6 figures	<input checked="" type="checkbox"/> Fee Transmittal, in duplicate	
<input type="checkbox"/> Other: _____		

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Krista Mathieson

Name of Person Mailing Correspondence

Krista Mathieson
Signature

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